

09939726

CLAIMS AS FILED

(Column 1)

(Column 2)

AMENDMENT A	NUMBER REFERRED	NUMBER EXTRA
FOR		
TOTAL CHARGEABLE CLAIMS	45 minus 20 =	
INDEPENDENT CLAIMS	minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

am not filed
4-504

CLAIMS AS AMENDED - PART II

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	29	Minus	28 = 1
Independent	7	Minus	3 = 4

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

TYPE	RATE	FEES	TYPE	RATE	FEES
	BASIC FEE	\$70.00		BASIC FEE	\$70.00
	XS 9=			XS 18=	
	X42=			X84=	
	+140=			+280=	
	TOTAL			OR TOTAL	

OTHER THAN

ENTITY	RATE	ADDITIONAL FEE	ENTITY	RATE	ADDITIONAL FEE
	XS 18=	18.00		XS 18=	18.00
	X84=	344.00		X84=	344.00
	+280=			+280=	
	TOTAL			TOTAL	
	OR ADDT. FEE			OR ADDT. FEE	

Fee Paid

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	** =
Independent	*	Minus	*** =

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
XS 9=		XS 18=	
X42=		X84=	
+140=		+280=	
TOTAL		TOTAL	
OR ADDT. FEE		OR ADDT. FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	** =
Independent	*	Minus	*** =

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
XS 9=		XS 18=	
X42=		X84=	
+140=		+280=	
TOTAL		TOTAL	
OR ADDT. FEE		OR ADDT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 2.